

Director's Signature:

Employee signatures on this time sheet certify the employee has performed the work associated with the account(s) listed."

Time Log/Program / Area: Drug Analysis Lab

Week Ending:

6/16/12

Employee Name:		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
James Hanchett 45151000 <i>[Signature]</i>	Employee Signature	Day: In - Out 1:00 1:00	7:00 3:00 12:00 12:30	7:00 1:00 12:00 12:30				
	Document exceptions or comments, indicate type and amount.	6 hrs OT						6 hrs OT
	Employee Signature	Day: In - Out						
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